

# United States Senate

COMMITTEE ON FINANCE

WASHINGTON, DC 20510-6200

April 21, 2010

## **Via Electronic Transmission**

John G. Folkemer  
Deputy Secretary  
Maryland Department of Health and Mental Hygiene  
State of Maryland  
201 West Preston Street  
Baltimore, MD 21201

Dear Deputy Secretary Folkemer:

In the United States, the federal and state governments spend roughly \$317 billion every year on the Medicaid program. As Ranking Member of the Senate Committee on Finance, I have an obligation to ensure that taxpayer dollars are appropriately spent on federal health care programs. Like the Medicare program, Medicaid suffers from systemic weaknesses that lead to fraud, waste, and abuse across the program, resulting in higher costs and less health care to those who are in need. The overutilization of prescription drugs, whether through drug abuse or outright fraud, plays a significant role in the rising cost of our healthcare system. The purpose of this letter is to request information regarding certain outliers in Maryland's Medicaid program and what steps Maryland takes to monitor rates of utilization.

In recent inquiries, I have asked the U.S. Department of Health and Human Services about physicians prescribing mental health drugs at astonishingly high rates. In addition to these concerns, a recent CNN report detailed the increasing abuse of OxyContin, Roxicodone, and Xanax. Specifically, the report described the role some pain management clinics and physicians play in the black market for these drugs. I write today to better ascertain how high rates of both mental health and pain medication utilization are affecting the Medicaid program, as well as how Maryland's rates compare to the national rates.

To that end, please provide charts that list of the top ten Medicaid prescribers of the following drugs for the years 2008 and 2009. For each prescriber, please provide his/her prescriber identifier, and the number of prescriptions written per drug per year, and the total amount billed to Medicaid per drug, separated for each year.

- Abilify;
- Geodon;
- Seroquel;
- Zyprexa;

- Risperdal;
- OxyContin;
- Roxicodone; and
- Xanax.

I thank you in advance for your cooperation and request that you provide the requested documents and written responses by no later than May 5, 2010. In your reply, please format information into a chart like the examples provided below. All formal correspondence should be sent electronically in PDF format to [Brian\\_Downey@finance-rep.senate.gov](mailto:Brian_Downey@finance-rep.senate.gov) or via facsimile to (202) 228-2131. Of course should you wish to discuss this matter further, please do not hesitate to contact Christopher Armstrong of my Committee staff at (202) 224-4515.

Sincerely,



Charles E. Grassley  
Ranking Member

Attachment

**Drug X, 2008**

Prescriber Identifier	Total prescriptions	Total billed to Medicaid
123456789	25,000	250,000
234567891	24,000	240,000
345678912	23,000	230,000
456789123	22,000	220,000
567891234	21,000	210,000
678912345	20,000	200,000
789123456	19,000	190,000
891234567	18,000	180,000
912345678	17,000	170,000
012345678	16,000	160,000

**Drug X, 2009**

Prescriber Identifier	Total prescriptions	Total billed to Medicaid
123456789	25,000	250,000
234567891	24,000	240,000
345678912	23,000	230,000
456789123	22,000	220,000
567891234	21,000	210,000
678912345	20,000	200,000
789123456	19,000	190,000
891234567	18,000	180,000
912345678	17,000	170,000
012345678	16,000	160,000

**Athos Alexandrou - Re: A Letter from Ranking Member Charles E. Grassley**

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**From:** Athos Alexandrou  
**To:** Brian\_Downey@finance-rep.senate.gov  
**Date:** 5/5/2010 8:40 AM  
**Subject:** Re: A Letter from Ranking Member Charles E. Grassley  
**CC:** John Folkemer  
**Attachments:** 2010-04-21 Letter to Maryland Medicaid.pdf; Sen Grassley\_Top 10 MCO Prescribers of drugs08.pdf; Sen Grassley\_Top 10 Medicaid Prescribers of drugs09FFS.pdf; Sen Grassley\_Top 10 MCO Prescribers of drugs09.pdf; Sen Grassley\_Top 10 Medicaid Prescribers of drugs08FFS.pdf

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Mr. Downey,

I am responding to Senator Grassley's request on behalf of John Folkemer.

Attached are 4 files with the information that the Senator had requested. The data includes claims paid for by the Managed Care Organizations (MCOs), as well as claims paid for under Fee-for-Service (FFS) per the additional clarification that was provided by the Senator's office to Kelli Littlejohn (Alabama Medicaid).

Please note that under the Maryland Medicaid Program, claims for Mental Health drugs are carved-out of the MCO benefit, hence they are paid under FFS.

If you have any questions related to this data, you can contact me at [REDACTED]

Thank you,  
Athos Alexandrou  
Director  
Maryland Medicaid Pharmacy Program

>>> "Downey, Brian (Finance-Rep)" Brian\_Downey@finance-rep.senate.gov> 4/21/2010 1:32 PM >>

Hello,

Please find attached a letter from Senator Grassley. Please confirm receipt, thank you.

Sincerely,

Brian M. Downey  
Investigative Assistant  
U.S. Committee on Finance  
219 Dirksen Senate Office Building  
Washington, DC  
Senator Charles E. Grassley  
(P) 202-224-4515

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**Top 10 MD Medicaid (MCO) Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2008 To 12/31/2008**

**Drug: OXYCONTIN**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AJ4147357	415	\$0.00
2	AT5199737/1306841614	153	\$0.00
3	MW1392656	121	\$0.00
4	BH5344142	97	\$0.00
5	MM1381312	95	\$0.00
6	1326001033	90	\$0.00
7	AU4176435	85	\$0.00
8	BF1293202	69	\$0.00
9	AH5041037	59	\$0.00
9	MK0768739	59	\$0.00

**Drug: ROXICODONE**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AJ4147357	1886	\$0.00
2	BS2950776/1366469819	897	\$0.00
3	AB1520243/1750341343	588	\$0.00
4	AU4176435	570	\$0.00
5	BH3709877	329	\$0.00
6	1326001033	279	\$0.00
7	FP0609644	238	\$0.00
8	AB2948327	211	\$0.00
9	MM1381312	200	\$0.00
10	AF2328412	197	\$0.00
10	AT5199737	197	\$0.00

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Note 2:** Maryland Medicaid does not have claim-specific payment information for claims that were paid for by the MCOs, hence reported amount paid is zero

**Top 10 MD Medicaid (MCO) Prescribers for the Drugs Requested by  
Senator Grassley**

Date of Service From 01/01/2009 To 12/31/2009

**Drug: OXYCONTIN**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1306841614	181	\$0.00
2	1205818549	165	\$0.00
3	1104870229	157	\$0.00
4	1760476105	126	\$0.00
5	AJ4147357	121	\$0.00
6	1295882959	96	\$0.00
7	1619970464	72	\$0.00
8	1548220692	70	\$0.00
9	1508855024	69	\$0.00
10	1174566004	68	\$0.00
10	1689645855	68	\$0.00

**Drug: ROXICODONE**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1366469819	970	\$0.00
2	BH3709877/1962405704	864	\$0.00
3	1750341343	741	\$0.00
4	1306841614	532	\$0.00
5	1295882959	467	\$0.00
6	1790752087	439	\$0.00
7	1215932561	420	\$0.00
8	1619970464	410	\$0.00
9	1205818549	386	\$0.00
10	AJ4147357	378	\$0.00

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Note 2:** Maryland Medicaid does not have claim-specific payment information for claims that were paid for by the MCOs, hence reported amount paid is zero



**Top 10 MD Medicaid Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2008 To 12/31/2008**

**Drug: ABILIFY**

<b>Rank</b>	<b>Prescriber ID</b>	<b>Rx Count</b>	<b>Amount Paid (Total)</b>
1	AJ4147357	1092	\$510,969.19
2	BB2623305/1093859357	789	\$376,039.90
3	BR0932613/1336258029	710	\$287,978.38
4	FP0363553/1508067398	559	\$259,354.68
5	AU4176435	292	\$120,312.28
6	AS6237437	290	\$123,993.18
7	BH8115811	283	\$127,267.40
8	BY5981522	279	\$121,194.89
9	AM7024754	274	\$119,981.63
10	1689767568	247	\$113,126.39

**Drug: GEODON**

<b>Rank</b>	<b>Prescriber ID</b>	<b>Rx Count</b>	<b>Amount Paid (Total)</b>
1	AJ4147357	444	\$136,859.97
2	AH8860911/1346261328	381	\$45,225.11
3	BS7949603/1780668830	217	\$63,811.08
4	1104842053	171	\$5,789.80
5	BB9482340	170	\$15,725.82
6	BG2257928	126	\$13,634.11
7	BY5981522	125	\$21,904.54
8	BB0603553	119	\$33,611.33
9	1487620423	91	\$35,858.26
9	1821063124	91	\$27,529.78

**Drug: OXYCONTIN**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	BZ5949295	62	\$3,888.73
2	AJ4147357	57	\$20,415.62
3	AJ2081381	46	\$4,903.20
4	AK3036034	44	\$5,678.65
5	BH9720423	42	\$4,635.39
6	1891768172	41	\$4,852.21
7	BG6830536	31	\$3,399.55
8	1760476691	30	\$3,330.05
8	AR1054371	30	\$4,558.49
10	1316918303	28	\$1,702.24
10	AC9630852	28	\$1,186.54

**Drug: RISPERDAL**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AJ4147357	3051	\$801,706.24
2	AU4176435	750	\$167,466.68
3	BY5981522	537	\$78,744.60
4	AK8752431	529	\$131,421.38
5	AM7024754	470	\$83,569.34
5	BG2257928	470	\$100,144.46
7	AW1464166	437	\$80,498.10
7	BW6931201	437	\$69,779.89
9	AN9652288	425	\$89,475.50
10	1487620423	384	\$97,602.04



**Drug: ROXICODONE**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	BB7376444	448	\$4,722.54
2	AJ4147357	313	\$5,677.33
3	BK0106155	194	\$1,639.80
4	BK0206599	161	\$1,515.69
5	AH2916445	150	\$1,564.05
6	BG5891191	143	\$1,359.23
7	AW1857006	127	\$1,304.88
7	BN0668775	127	\$1,113.12
9	BH3228675	97	\$693.93
10	BO9078482	93	\$916.22

**Drug: SEROQUEL**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AJ4147357	2234	\$581,996.57
2	BG2257928/1265451470	951	\$127,709.46
3	AK8752431/1457477929	735	\$149,246.02
4	AA5917907/1679656904	694	\$189,653.44
5	AU4176435	576	\$137,608.75
6	BO0489674	325	\$57,912.02
7	1851362701	306	\$87,757.03
8	BD0619998	287	\$65,059.01
9	BM9982580	284	\$63,145.46
10	BH8115811	270	\$76,007.46

**Drug: XANAX**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AK9161251/1417943309	1081	\$7,778.99
2	AA6011275/1821097015	1020	\$11,899.75
3	AJ4147357	606	\$4,345.23
4	AU4176435	287	\$3,004.62
5	BH3709877	273	\$2,465.82
6	AB9772662	255	\$2,054.47
7	AK5435967	253	\$2,752.31
8	AJ2540602	250	\$1,378.54
9	AR1054371	249	\$1,569.44
10	1922026129	224	\$1,804.65

**Drug: ZYPREXA**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	AJ4147357	1140	\$528,616.01
2	BG2257928/1265451470	974	\$287,470.85
3	AH8860911/1346261328	477	\$114,287.31
4	AW8358548/1336163831	455	\$208,525.13
5	BH4162575	227	\$47,522.31
6	AE8580690	216	\$87,501.01
6	BY5981522	216	\$65,182.74
8	1780781773	215	\$92,048.81
9	1750327086	191	\$35,503.83
10	AU4176435	181	\$86,929.91

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Top 10 MD Medicaid Prescribers for the Drugs  
Requested by Senator Grassley**

Date of Service From 01/01/2009 To 12/31/2009

Drug: ABILIFY

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1235399577	644	\$312,798.77
2	1508067398	641	\$310,884.28
3	1093859357	633	\$330,169.30
4	1336258029	624	\$286,991.43
5	1689767568	524	\$255,806.73
6	1023057890	418	\$192,693.25
6	1972685840	418	\$198,367.74
8	1144243783	411	\$224,014.68
9	1679656904	357	\$157,851.69
10	1376693051	339	\$169,963.12
10	1821063124	339	\$185,393.44

Drug: GEODON

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1780668830	470	\$151,154.41
2	1346261328	407	\$55,278.03
3	1992834238	178	\$33,149.64
4	1235399577	175	\$66,368.71
5	1174561823	173	\$35,599.58
6	1821063124	168	\$47,306.61
7	1902912918	152	\$33,546.44
8	1558442566	145	\$37,617.44
9	1336163831	143	\$71,836.77
10	1679656904	139	\$59,813.03

**Drug: OXYCONTIN**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1467470294	62	\$9,678.15
2	1316918303	61	\$7,730.25
3	1891768172	51	\$5,424.30
4	1083682074	50	\$8,277.24
5	1114921665	46	\$9,262.26
6	1760476691	38	\$6,466.27
7	1326005042	35	\$3,675.68
8	1508850991	29	\$8,249.09
9	1093714057	25	\$4,866.51
10	1457330466	24	\$1,935.81
10	1609929066	24	\$13,800.63

**Drug: RISPERDAL**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1376504514	708	\$54,556.19
2	1700973484	701	\$94,697.12
3	1457477929	660	\$50,383.08
4	1821042599	641	\$64,245.44
5	1265451470	590	\$90,768.97
6	1952439549	578	\$25,830.81
7	1023057890	571	\$45,898.69
8	1093753519	513	\$37,696.84
9	1487620423	504	\$84,674.18
10	1770574931	489	\$32,065.55

**Drug: ROXICODONE**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1083682074	309	\$2,980.98
2	1821191412	186	\$2,001.12
3	1255443727	172	\$3,260.63
4	1760476691	162	\$1,845.68
5	1801864350	145	\$1,310.84
6	1104892207	123	\$2,015.33
7	1922185073	112	\$909.65
8	1255338869	111	\$2,124.98
9	1326014788	90	\$558.05
10	1477524262	89	\$988.30

**Drug: SEROQUEL**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1508067398	794	\$154,897.22
2	1457477929	791	\$173,383.80
3	1427032705	776	\$236,266.97
4	1679656904	677	\$203,027.37
5	1346262185	604	\$105,084.22
6	1851362701	590	\$158,411.70
7	1265451470	550	\$150,136.64
8	1154350635	533	\$177,466.25
9	1821097015	504	\$161,503.61
10	1477676807	497	\$159,450.20

**Drug: XANAX**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1821097015	1515	\$14,933.62
2	1417943309	1004	\$6,572.65
3	1457322364	883	\$8,561.86
4	1366469819	559	\$4,698.23
5	1962405704	485	\$4,248.01
6	1013936327	477	\$4,556.72
7	1790752087	449	\$4,441.93
8	1548220692	418	\$3,400.29
9	1245280999	379	\$3,351.15
10	1538197793	367	\$2,492.78

**Drug: ZYPREXA**

Rank	Prescriber ID	Rx Count	Amount Paid (Total)
1	1265451470	469	\$305,389.91
2	1346261328	431	\$111,705.69
3	1336163831	401	\$314,963.12
4	1720120413	319	\$136,771.56
5	1104842053	310	\$70,192.84
6	1023057890	306	\$175,906.73
7	1578698486	288	\$176,074.76
8	1750327086	280	\$47,103.72
9	1780781773	255	\$101,353.67
10	1992834238	234	\$56,075.94

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service



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**United States Senate**

COMMITTEE ON THE JUDICIARY

WASHINGTON, DC 20510-6275

BRUCE A. COHEN, *Chief Counsel and Staff Director*  
KOLAN L. DAVIS, *Republican Chief Counsel and Staff Director*

January 23, 2012

**VIA ELECTRONIC TRANSMISSION**

Athos Alexandrou  
Director, Maryland Medicaid Pharmacy Program  
201 West Preston Street  
Baltimore, MD 21201

Dear Director Alexandrou,

On May 5, 2010, your office provided my staff with data regarding the top ten prescribers of several pain management and mental health drugs in your state. These types of drugs have addictive properties, and the potential for fraud and abuse by prescribers and patients is extremely high. Mental health drugs continue to be prescribed at astounding rates and pain management clinics are turning into a hotbed for black market painkillers. When these drugs are prescribed to Medicaid patients, it is the American people who pay the price for over-prescription, abuse, and fraud.

After an extensive review of prescribing habits of the serial prescribers of pain and mental health drugs in your state, I have concerns about the oversight and enforcement of Medicaid abuse in your state. While I am sensitive to concerns about the potential for misinterpretation of the data you provided, the numbers themselves are quite shocking.

For example, the top prescriber of both OxyContin and Roxicodone wrote more than double the number of prescriptions in 2009 than the second top prescriber for each drug. This outlier is consistent with several of the antipsychotic drugs—with the

top prescribers writing double or triple the number of prescriptions as the other prescribers on the list.

It is my intention to ensure that each of the states is adequately monitoring, investigating, and stopping fraud and over-prescription of these types of drugs. Therefore, please provide answers to the following questions:

1. What action, if any, has your agency taken with respect to the prescribers identified to the Committee?
2. If there has been no action taken with respect to these prescribers, please explain why not.
3. Please identify which of the providers identified to the Committee remain eligible to bill the Medicaid Program.
4. Please provide the 2010 and 2011 numbers for the top prescribers of these same drugs.
5. Has each of these prescribers been cross-checked for complaints or misconduct with the state medical board or the National Practitioner Data Bank? If not, do you plan to do so?
6. Have any of the prescribers identified to this Committee been referred to your state medical board?
7. Is there any system set up in your state to identify and monitor excessive prescription writing? If not, why not?
8. Have you received any training or guidance from the Centers for Medicare and Medicaid Studies to help identify potential issues with prescription drugs?
9. Does your state maintain a database of all prescribed controlled-substances? If so, what entities have access to it?
10. Does your state have any point-of-sale restrictions related to maximum units, prior authorization, therapeutic duplication, or early refill? If not, why not?
11. Were any of these top ten prescribers identified in the federal-mandated Drug Utilization Review or CMS-base retrospective reviews?
12. Does your state have any programs in place to educate providers about the prescription of antipsychotics to children and adolescents?

Thank you in advance for your cooperation and attention in this matter. When responding to this letter, please number your answers in accordance with my questions. I would appreciate a response by February 13, 2012. If you have any questions, please do not hesitate to contact Erika Smith of my staff at (202) 224-5225.

Sincerely,

A handwritten signature in blue ink that reads "Chuck Grassley". The signature is written in a cursive, flowing style.

Charles E. Grassley  
Ranking Member  
Committee on the Judiciary



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene  
201 W. Preston Street • Baltimore, Maryland 21201

Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – Joshua M. Sharfstein, M.D., Secretary

April 16, 2012

Senator Charles Grassley  
135 Hart Office Building  
Washington, DC 20510

Dear Senator Grassley:

Thank you for your letter of January 23, 2012. We appreciate your interest in two important challenges facing Maryland and other states: the abuse of prescription drugs and the appropriate use of anti-psychotic and other mental health drugs. Because our response to these issues extends beyond the Medicaid Program, I am responding to your inquiry.

We are taking a range of steps to address these two challenges. Key information is presented below and in the attachments.

### **Abuse of Prescription Drugs**

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The Department considers the abuse of pain medications and other prescription drugs to be a serious public health problem. We track drug overdose deaths as a core public health measure, as part of our State Health Improvement Process. We also track treatment admissions for prescription drug abuse across the state.

In May 2011, Maryland's General Assembly passed and Governor O'Malley signed into law a bill establishing a Prescription Drug Monitoring Program in Maryland. Since then, we have taken a number of steps to implement Maryland's program, including:

- obtaining a Harold Rogers Grant from the US Department of Justice, Bureau of Justice Assistance;
- obtaining a Byrne Justice Assistance Grant from the Maryland Governor's Office of Crime Control & Prevention;
- working in partnership with the State's Advisory Board on Prescription Drug Monitoring; and
- drafting PDMP implementing regulations for stakeholder feedback and public comment.



With the Maryland Health Care Commission, we are designing a prescription drug monitoring program that is integrated, to the greatest extent possible, with the statewide Health Information Exchange. Our goals include facilitating near real-time dispenser reporting of controlled substance

prescription data to the data base, as well as allowing real-time provider access to data through the health information exchange at the point of care. Integration will incentivize healthcare provider utilization of both systems and increase the quality and accessibility of information in the database.

A key implementation goal for Maryland's prescription drug monitoring program is to allow for data sharing with neighboring states. Maryland's legislation allows the Program to disclose data to the authorized administrator of another state's program, provided that the requesting state agrees to use the data in accordance with the restrictions imposed by Maryland's law. Maryland's Program will also seek to establish technical interoperability with neighboring states' programs, so that data sharing can be automated, seamless and secure.

To coordinate action against physicians and other health professionals who inappropriately prescribe pain medications, we are implementing a "fusion center" approach to data sharing and collaboration across the Department. We are bringing together disparate units of the Department to share real time intelligence related to scheduled drugs which will result in prompt and coordinated investigations and effective collaboration with other key state and federal agencies.

Participants in the Integrated Unit include:

- the State Laboratory (which oversees state authorization to prescribe and dispense controlled substances),
- the Maryland Boards of Physicians, Nursing and Pharmacy (which oversees respective licensees),
- the Department's Office of the Inspector General (which investigates allegations of fraud and abuse within the Medicaid Program including provider fraud, diversion or abuse),
- the State Medicaid Program (which monitors claims for controlled drugs and implements multiple actions when warranted),
- the Office of the Chief Medical Examiner (which investigates intentional and unintentional overdose deaths), and
- the Office of the Attorney General.

This integrated approach will allow for a thorough and fair review of concerns. When indicated, the Unit and individual components refer matters to the Drug Enforcement Administration, the State Police, the Federal Bureau of Investigation and the U.S. Attorney's Office.

In response to your request, the attached documents provide detail regarding Medicaid prescriptions for the drugs of interest for 2010 and 2011. However, it is important to note that, in focusing our investigations and enforcement actions, we consider the rate of Medicaid prescribing as one factor, but it is far from the only one. Serious concerns related to patterns of prescribing may be raised by managed care organizations, insurers, federal and local law enforcement, state and federal officials outside Maryland, substance abuse treatment providers, and pharmacies.

Recently, for example, we learned of concerns about a prescriber from a Medicaid managed care plan. Within six weeks, the Department acted to remove his controlled substances registration. This widely reported action was taken in coordination with the FBI, DEA, and Maryland State Police. (See attached news article).

#### **Appropriate Use of Mental Health Drugs**

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The Department considers supporting the appropriate use of antipsychotic and other medications for mental health conditions to be an important priority.

*Children.* Effective October 19, 2011, the Maryland Medicaid Pharmacy Program implemented a peer-review authorization process to ensure the safe and effective use of antipsychotics in children. The peer review informs clinicians of relevant clinical information for decision-making and ensures the appropriate use of these drugs while limiting adverse sequelae in Medicaid's vulnerable pediatric patients. Claims for antipsychotic medications that are for children younger than the FDA approved age, require a Prior Authorization based on the peer-review assessment. The Pharmacy Program has implemented a "hard" edit which will prevent a claim for an antipsychotic drug from processing, when is determined that it does not meet the FDA approved age. The project will be implemented in three phases:

- Phase I – Apply off-label use edit for children ages 0 – 4, Effective October 19, 2011
- Phase II – Apply off-label use edit for children ages 5 – 9, Expected to begin FY 2013
- Phase III – Apply off-label use edit for children ages > 10



Senator Grassley  
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*Adults.* In late 2011, Maryland's Medicaid program initiated a new review of Maryland policy and clinical criteria related to drug coverage for atypical antipsychotics in adults. We are now developing a program to begin later this year through which pharmacists and psychiatrists at the University of Maryland will review high cost or complicated regimens employing antipsychotics in adults. Clinical pharmacists will retrospectively review regimens, secure diagnostic and other clinical data from prescribers in order to determine the appropriateness of these regimens, recommend changes in drug therapy to the prescribers and negotiate a safer, more cost-effective regimen. In the event that there is a problem negotiating an acceptable course of treatment, the psychiatrist will become involved. The program will also continue to monitor the prescribing for those patients.

### **Conclusion**

Maryland is taking significant steps to address the public health challenges of prescription drug abuse and inappropriate prescribing of mental health drugs. As we gain additional experience in these areas, we anticipate taking additional steps in the months ahead.

Thank you for your interest. Please let me know if you have further questions.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Joshua M. Sharfstein'.

Joshua M. Sharfstein, M.D.  
Secretary

Attachments

**Top 10 MD Medicaid Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2010 to 12/31/2010**

**ABILIFY**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAU	567	\$303,413.57
2	AACE	514	\$256,501.03
3	AAAY	512	\$296,237.26
4	AAAQ	487	\$244,582.88
5	AABW	445	\$235,611.52
6	AAAH	398	\$215,773.91
7	AACK	389	\$198,048.26
8	AABI	345	\$176,100.82
9	AAAI	335	\$180,562.10
10	AABX	334	\$178,894.91

**GEODON**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AABH	468	\$64,973.46
2	AADH	418	\$155,060.40
3	AACU	279	\$67,582.21
4	AAAU	220	\$87,070.05
5	AADN	203	\$86,547.30
6	AABX	202	\$73,666.90
7	AAAY	199	\$86,055.62
8	AADQ	179	\$49,996.51
9	AACW	175	\$89,206.47
10	AADM	161	\$53,489.31

**OXYCONTIN**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAT	41	\$5,547.61
2	AAAE	39	\$6,093.76
3	AAAK	33	\$9,635.78
3	AABE	33	\$2,422.20
5	AABC	31	\$3,749.72
6	AACS	30	\$3,796.60
7	AADG	28	\$19,679.51
8	AABY	27	\$6,774.16
9	AAAN	26	\$1,990.77
10	AABD	25	\$1,321.55
10	AABP	25	\$11,671.45
10	AACA	25	\$3,114.98

**RISPERDAL**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACE	797	\$23,638.54
2	AABM	758	\$25,664.15
3	AADA	699	\$66,363.21
4	AABW	698	\$24,128.74
5	AAAP	626	\$115,824.44
6	AAAX	619	\$58,163.41
7	AADL	600	\$41,632.47
8	AADS	567	\$18,885.25
9	AAAM	517	\$106,172.35
9	AACR	517	\$53,352.93

**ROXICODONE**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACC	274	\$2,345.71
2	AAAE	236	\$1,781.42
3	AAAT	168	\$1,595.24
4	AADO	167	\$1,079.67
5	AACO	146	\$8,276.81
6	AAAK	141	\$2,458.52
7	AAAR	140	\$11,230.60
8	AACD	121	\$664.30
9	AAAV	120	\$6,571.45
10	AADE	102	\$547.35

**SEROQUEL**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACE	1150	\$239,880.59
2	AACH	826	\$262,768.37
3	AACW	736	\$268,531.22
4	AABS	697	\$252,773.18
5	AAAM	692	\$224,468.89
6	AACK	690	\$230,681.81
7	AADP	688	\$207,211.63
8	AABW	683	\$172,408.81
9	AADN	639	\$251,445.38
10	AABI	633	\$117,100.74

## **XANAX**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AADN	2279	\$15,980.07
2	AABV	1630	\$10,550.41
3	AABB	1107	\$7,188.87
4	AABQ	1039	\$5,082.78
5	AADJ	682	\$3,808.41
6	AABU	663	\$4,583.14
7	AADT	617	\$3,932.67
8	AAAA	541	\$3,682.65
9	AACP	507	\$2,608.71
10	AADP	478	\$3,073.30

## **ZYPREXA**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AABH	537	\$155,183.28
2	AAAX	516	\$375,376.65
3	AABF	462	\$419,664.42
4	AADC	454	\$91,605.12
5	AACL	298	\$212,524.09
6	AAAG	284	\$116,961.35
7	AADB	263	\$111,085.87
8	AABR	260	\$88,032.96
9	AADP	250	\$126,669.48
10	AAAD	223	\$76,451.99

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Top 10 MD Medicaid Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2011 to 12/31/2011**

**ABILIFY**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AABW	550	\$320,575.66
2	AABI	518	\$289,874.47
3	AACE	501	\$278,015.61
4	AABU	480	\$258,268.08
5	AACG	473	\$266,904.54
6	AABZ	431	\$226,826.01
7	AAAU	430	\$284,021.56
8	AAAY	427	\$289,722.86
9	AAAQ	384	\$217,878.60
10	AACK	354	\$201,794.74

**GEODON**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AABH	370	\$63,681.30
2	AADH	349	\$142,778.03
3	AADN	336	\$160,166.90
4	AAAF	218	\$103,042.62
5	AAAU	206	\$97,341.62
6	AABX	192	\$64,435.71
7	AABU	171	\$48,799.68
8	AABO	164	\$68,615.48
8	AACW	164	\$87,566.56
10	AABZ	159	\$45,266.67



**OXYCONTIN**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAZ	24	\$9,034.90
1	AABN	24	\$9,996.75
3	AAAL	22	\$2,631.92
3	AAAW	22	\$1,341.81
5	AACZ	20	\$5,400.57
6	AACB	19	\$5,460.11
7	AACJ	18	\$2,982.06
7	AACN	18	\$2,324.96
7	AADE	18	\$1,983.33
10	AAAR	17	\$13,640.51
10	AABD	17	\$1,060.29
10	AADG	17	\$9,699.48

**RISPERDAL**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACE	970	\$12,341.83
2	AABM	832	\$15,725.86
3	AABW	739	\$15,094.45
4	AADA	692	\$20,517.69
5	AAAP	652	\$94,698.62
6	AABK	590	\$101,245.47
7	AABZ	561	\$6,382.42
8	AADM	494	\$9,038.97
9	AAAM	492	\$48,768.19
10	AAAX	488	\$31,682.08

**ROXICODONE**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACX	165	\$1,292.03
2	AAAR	135	\$8,557.99
3	AABT	129	\$1,180.12
4	AACD	102	\$564.33
5	AAAE	96	\$668.15
6	AADE	94	\$520.51
7	AADK	91	\$1,191.08
8	AACF	90	\$536.29
9	AABJ	86	\$1,058.76
10	AADO	83	\$626.76

**SEROQUEL**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACH	1341	\$487,190.44
2	AACE	1227	\$304,902.58
3	AADF	905	\$304,684.91
4	AAAM	876	\$346,242.73
5	AACK	822	\$373,215.78
6	AADN	717	\$302,084.98
7	AACW	695	\$278,303.46
8	AABZ	689	\$146,603.98
9	AABW	686	\$203,953.10
10	AAAY	681	\$244,931.42

**XANAX**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AADN	2762	\$18,806.18
2	AABB	1663	\$9,179.44
3	AABV	1619	\$9,461.25
4	AABU	1271	\$6,764.55
5	AABQ	914	\$4,501.52
6	AACG	792	\$10,267.44
7	AAAV	694	\$3,660.65
8	AAAU	672	\$4,286.86
9	AACT	649	\$3,595.87
10	AABZ	623	\$2,746.65

**ZYPREXA**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AABH	533	\$177,749.30
2	AAAX	473	\$409,778.32
3	AABF	467	\$517,816.06
4	AACH	396	\$255,387.06
5	AADC	364	\$120,354.54
6	AACL	269	\$229,335.88
7	AABR	259	\$84,762.98
8	AADB	246	\$105,970.72
9	AADS	245	\$131,976.50
10	AACR	240	\$68,934.19

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Top 10 MD Medicaid (MCO) Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2010 to 12/31/2010**

**OXYCONTIN**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AACP	193	\$0.00
2	AAAR	182	\$0.00
3	AADR	136	\$0.00
4	AAAC	133	\$0.00
5	AAAJ	105	\$0.00
6	AAAO	93	\$0.00
7	AACM	76	\$0.00
8	AABA	72	\$0.00
9	AACI	68	\$0.00
10	AACY	67	\$0.00

**ROXICODONE**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAR	2135	\$0.00
2	AACO	1462	\$0.00
3	AACP	1237	\$0.00
4	AAAV	1010	\$0.00
5	AAAB	1006	\$0.00
6	AADR	985	\$0.00
7	AABL	923	\$0.00
8	AADT	828	\$0.00
9	AABA	812	\$0.00
10	AABG	810	\$0.00

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Note 2:** Maryland Medicaid does not have claim-specific payment information for claims that were paid for by the MCOs, hence reported amount paid is zero

**Top 10 MD Medicaid (MCO) Prescribers for the Drugs  
Requested by Senator Grassley**

**Date of Service From 01/01/2011 to 12/31/2011**

**OXYCONTIN**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAC	128	\$0.00
2	AADI	121	\$0.00
3	AACP	117	\$0.00
4	AADD	110	\$0.00
5	AACM	109	\$0.00
6	AAAJ	82	\$0.00
7	AACV	80	\$0.00
8	AAAR	77	\$0.00
9	AADR	71	\$0.00
10	AACQ	60	\$0.00

**ROXICODONE**

Rank	Prescriber Identifier	Rx Count	Amount Paid (Total)
1	AAAR	3064	\$0.00
2	AAAV	1599	\$0.00
3	AABV	1332	\$0.00
4	AADR	1254	\$0.00
5	AAAB	1245	\$0.00
6	AACO	1231	\$0.00
7	AACP	1177	\$0.00
8	AAAS	1130	\$0.00
9	AAAC	1047	\$0.00
10	AADI	1008	\$0.00

**Note 1:** In Maryland, Mental Health Drugs are Carved-Out of the MCO benefit and are paid for under Fee-for-Service

**Note 2:** Maryland Medicaid does not have claim-specific payment information for claims that were paid for by the MCOs, hence reported amount paid is zero

# State suspends doctor's right to prescribe most pain killers

December 08, 2011 | By Meredith Cohn, The Baltimore Sun

State health officials took the unusual step Thursday of suspending the authority of a Salisbury pain doctor to write prescriptions for opiates, narcotics and all other controlled dangerous substances commonly used to treat pain.

The officials said Dr. Brent R. Fox wasn't conducting thorough exams of patients and was prescribing drugs in amounts outside of the standards. They will consider a permanent revocation next week and have referred the case to the state Board of Physicians for investigation of his right to practice medicine.

"We have the authority to act," said Frances B. Phillips, deputy secretary of public health services for the Maryland Department of Health and Mental Hygiene. "We thought it was important to act fast because we believed he was a danger to the public."

The state routinely inspects doctors and pharmacists who regularly dispense controlled dangerous substances. However, Phillips acknowledges it was unusual for the state to exert its authority to suspend someone. But she said state officials could take similar steps in the future.

Fox's case was referred to the state by a managed-care organization with which Fox was affiliated. Fox, who operates Peninsula Pain Management in Salisbury, could not be reached for comment.

Normally, a referral would go to the Board of Physicians, which oversees all doctors' licenses in the state. It has come under fire recently for its backlog of investigations.

The board doesn't generally confirm the existence of its investigations. Its deputy director, John Papavasiliou, did say, "We do share information [with the Department of Health and Mental Hygiene] when it's appropriate."

He also said that suspensions by the board related to prescription drugs are not uncommon, though he couldn't immediately offer statistics.

According to the board's website, Fox, 56, has been licensed in the state since 1987. State records show he registered his business with the state in 2008 as a Fox Laser & Skin Health Specialists for cosmetic treatments. He changed the name to Peninsula Pain Management in January 2010.

He continues to have privileges at Peninsula Regional Medical Center in Salisbury, where he once provided anesthesia for patients. A spokesman said he no longer provides that service there.



State health officials in general have been seeking to crack down on prescription drug abuse but preserve the ability of those who need the medications to acquire them.

The General Assembly passed a law during the 2011 session to create a new monitoring system common in other states. It requires pharmacies to log each filled prescription in a database so prescribers in doctors' offices, emergency rooms and urgent care facilities can check before writing prescriptions for the same medications.

Phillips said the system would be up and running soon.

The effort was made because the number of people abusing painkillers and other prescription drugs in the state has been rising sharply in recent years.

National drug officials say prescription painkillers, stimulants and depressants are now the most widely abused drugs behind marijuana, with more than 6,000 Americans a day abusing them for the first time. In Maryland, the number of people seeking treatment for addiction to a prescription drug rose to more than 7,000 in 2010 from 3,400 in 2007.

The wide availability and the highly addictive nature of some of the drugs are likely reasons for the rise, officials said.

## **Doctor punished for overprescribing**

**Daily Times - Salisbury, Md.**

**Author: Jennifer Shutt**

**Date: Dec 9, 2011**

SALISBURY -- Dr. Brent Fox, a pain-management physician, has been suspended from prescribing controlled dangerous substances after a review found he posed an "imminent danger."

The Maryland Department of Health and Mental Hygiene notified pharmacies and Fox on Dec. 6, following an independent audit alleging Fox "failed to conform to the professional standards of care mandated for doctors who practice pain management medicine, and that his actions put the public in danger."

Fox can no longer write prescriptions nor can his patients fill or refill any prescriptions they have received from him for the class of drugs that include Vicodin and oxycodone.

"His prescribing habits are deplorable and in any state would warrant an immediate suspension order," states the review. "His prescribing is similar to the pill mills in the southeast and is medically inappropriate, especially the use of two doses of oxycodone in high quantities. His patient population reviewed was a combination of addicts, doctor shoppers and patients where opiates were unwarranted."

Elliott A. Alman, partner at Alman & Alman LLC, and counsel for Fox, says his client is a well-respected anesthesiologist and board-certified pain management physician within the local community.

"It is our firm position Dr. Fox has done nothing wrong and nothing improper," Alman said. "Ultimately, hopefully this matter will be resolved in his favor."

The investigation by the Department of Health and Mental Hygiene began after Priority Partners, a medical care organization in which Fox was a participating physician, terminated Fox and informed the department of their findings from a quality review.

The summary of suspension issued by the department contains findings from Dr. Laura Herrera, the department's chief medical officer, as well as the MCMC, the independent auditor used by Johns Hopkins Health, which is a part owner of Priority Partners.

The findings looked specifically at the charts and lab results of 14 patients, one of which was a pregnant woman who had been diagnosed with bipolar disorder by a separate medical professional. The report alleges Fox not only did not consult with the woman's psychiatrist, but "agreed to add methadone to the already high opiate doses even though it placed the patient and her unborn child at substantial risk." The report also alleges the patient had no reason for the alleged pain.

Among the additional patients included in the quality review, the report alleges Fox:

- >> Prescribed excessive medication for non-existent diagnosis;
- >> Prescribed 13 pills per day on average for six months to patient one;
- >> Failed to document patient three's medical history or note she was pregnant;
- >> Failed to obtain records from prior or current physicians;
- >> Ignored results of numerous patient's drug tests that were positive for a range of prescription medications as well as illegal narcotics including benzodiazepines, cocaine, opiates, the active ingredient in marijuana THC, Tramadol and Xanax;
- >> Prescribed a patient an average of nine pills of oxycodone per day for one year;
- >> Prescribed medications without providing any other type of care or therapy.

In every case Herrera alleges Fox failed to conform to professional standards of care, which includes obtaining a medical history, performing a pain assessment, reviewing diagnostic tests, considering a drug screen, determining the affect the opiates on patients and creating an opiate treatment plan.

"As a result of its findings, DHMH has summarily suspended and intends to revoke Dr. Fox's controlled dangerous substance registration," said the Department of Health and Mental Hygiene.

Fox was first issued a physician license in Maryland on March 13, which was set to expire in March of 2013. Fox, along with his practice located at 108 Milford St., Suite 105, are not facing criminal charges.

Fox is not employed or affiliated with Peninsula Regional Medical Center or the Peninsula Regional Medical Group.

A hearing is scheduled for Dec. 12 in Baltimore.